

## APPLICATION FOR SEASONAL EMPLOYMENT

**Town of Eastham**  
**Recreation & Beach Department**  
**2500 State Highway, Eastham, MA 02642**

**Phone: (508) 240-5974**  
**Fax: (508) 240-5975**  
**Email: recreation@eastham-ma.gov**

- ☐ **New Applicant** (\*\*Please note - Interview process will not begin until May 1)  
How were you referred to us? \_\_\_\_\_
- ☐ **Re-Applying**
- ☐ **Date Available to start work:** \_\_\_\_\_
- ☐ **Will Work THROUGH Labor Day 2008**  
(If you are not able to work through Labor Day, please explain why and state the last day you CAN work.  
\_\_\_\_\_  
\_\_\_\_\_

Position Applying For: (1) \_\_\_\_\_ (2) \_\_\_\_\_  
(Lifeguard, Water Safety Instructor, Counselor, Gate Attendant, Sticker Sales)

(Please print or type)

Name \_\_\_\_\_  
(Last) (First) (Middle or Middle Initial)

Social Security # \_\_\_\_\_ ☐ Male ☐ Female

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
(Street)  
(City) (State) (Zip)

Summer Address \_\_\_\_\_ Phone \_\_\_\_\_  
(if different) (Street)  
(City, State, Zip)

Email Address: \_\_\_\_\_

Best way for us to contact you: \_\_\_\_\_

### Education Information

### Year Graduated/Major Course

High School _____	_____
Prep School _____	_____
College _____	_____
Military Service/Other _____	_____

Do you have a driver's license? ☐ Yes ☐ No  
If yes, what state is it issued by? \_\_\_\_\_  
If yes, do you have use of an automobile? ☐ Yes ☐ No

If you are hired and are under the age of 18, can you furnish a work permit? ☐ Yes ☐ No

**Please complete all of the information requested on the other side. ----->**

### **Employment Experience**

Start with your present or last job. Include military service and volunteer activities.

<b>1. Employer</b>	<u>Dates Employed</u> From _____ To _____	Job Title
Street Address	<u>Hourly Rate/Salary</u> Starting _____ Final _____	Work Performed
City, State, Zip	Telephone	Supervisor
Reason for Leaving		
<b>2. Employer</b>	<u>Dates Employed</u> From _____ To _____	Job Title
Address	<u>Hourly Rate/Salary</u> Starting _____ Final _____	Work Performed
City, State, Zip	Telephone	Supervisor
Reason for Leaving		
<b>3. Employer</b>	<u>Dates Employed</u> From _____ To _____	Job Title
Street Address	<u>Hourly Rate/Salary</u> Starting _____ Final _____	Work Performed
City, State, Zip	Telephone	Supervisor
Reason for Leaving		

**Special Skills and Qualifications** - (CPR Required and First Aid Preferred) (For Lifeguards: All certifications must be current and copies must be provided. Water Safety Instructor Preferred.)

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**References** - please list below the name of (3) professional or work-related references.

Name	Title/Company	Telephone	Years Acquainted
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

**\*\*\* Please return to the Recreation Office between the hours of 9am - 4pm, Monday thru Friday. Or mail to: Town of Eastham/Rec Dept. 2500 State Highway Eastham, Ma. 02642.**